10 ILCS 5/19-3, 29-10

ABSENTEE BALLOT APPLICATION FORM

Office of the White County Clerk 301 E. Main Street, P O Box 339 Carmi, IL 62821

Carmi, IL 62821		
618-382-7211 Ext 1		
Please print your name and current address		
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	_	
	_	
		(FOR OFFICE USE ONLY)
To be voted at the	_election in the County of White an	d State of Illinois, in the #
(Primary or General)		
precinct of the in t	:he City of	
(Township)		
I, state that I am a resident of the #	precinct of the	in the City of
		, in such City
or Town in the County of White, and State of		
am lawfully entitled to vote in such precinct	at theelectio	on to be held therein on
;and that I w		
I request ballot for(Drive an Orth)	Party.	
(Primary Only)		
I hereby make application for an official b	allot or ballots to be voted by me a	t such election, and I agree that I shall
return such ballot or ballots to the official iss	suing the same prior to the closing o	of the polls on the date of the election or,
if returned by mail, postmarked no later than	n midnight preceding election day, f	for counting no later than during the
period for counting provisional ballots, the la	ast day of which is the 14 th day follo	wing election day.
Under penalties as provided by law pursua	·	gned certifies that the statements set
forth in this application are true and correct.		
Dated thisday of	<i>.</i>	
Ballot to be mailed to:	Signature of Applicant	